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CONFIRMATION NO. 5784

Bib Data Sheet

SERIAL NUMBER 10/521,167	FILING OR 371(c) DATE 03/07/2005 RULE	CLASS 424	GROUP ART UNIT 1649	ATTORNEY DOCKET NO. DC-0301
APPLICANTS Joyce A. DeLeo, Lebanon, NH;				
** CONTINUING DATA ***** This application is a 371 of PCT/US03/24148 07/31/2003				
** FOREIGN APPLICATIONS ***** <div style="text-align: center;">** SMALL ENTITY **</div>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY NH	SHEETS DRAWING 0	TOTAL CLAIMS 1
INDEPENDENT CLAIMS 1				
ADDRESS 26259				
TITLE METHOD OF REDUCING NEUROPATHIC PAIN				
FILING FEE RECEIVED 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	